## LOCATIONS:

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January 21, 2015

Angela Garner
Deputy Director
Division of State Demonstrations and Waivers
Center for Medicaid and CHIP Services, CMS
7500 Security Boulevard, Mail Stop S2-01-16
Baltimore, MD 21244-1850

Re: Proposed California Amendment to Bridge to Health Reform Demonstration (No. 11-W-00193/9), Drug Medi-Cal Organized Delivery System Waiver

Dear Ms. Garner:

I am writing on behalf of Matrix Institute on Addictions. We provide substance use disorder services to 375 patients at our opioid treatment program located at 5220 W. Washington Blvd., Suite 101 in Los Angeles, California. We are strongly opposed to sections of the California Bridge to Reform Demonstration (No. 11-W-00193/9) Amendment for Drug Medi-Cal Organized Delivery System Waiver, submitted by the California Department of Health Care Services. Our concern, based on the 30 years we have been delivering services, is that waiving federal access protections and granting Los Angeles County authority to establish reimbursement rates will result in decreased access to critical, life-saving treatment services.

The current proposal will waive beneficiary freedom of choice, equality in amount, duration and scope, state wideness and reasonable promptness, some of which form the basis of a lawsuit 20 years ago called Sobky Vs. Smoley. This ruling provided an avenue for providers to contract directly with the County or State Authority, ensuring all patients in need access to opioid agonist services. As a result of the lawsuit, significantly more people have entered treatment and beneficiaries can access medically-necessary treatment on demand, without the waiting lists that were standard practice before the lawsuit. This waiver is likely to overturn that lawsuit and cause California to regress back more than 20 years. We ask that CMS *NOT* do anything that may undermine the permanent injunction that was based on overwhelming evidence of county efforts to limit access. Instead, we suggest CMS require California to carve-out opiate treatment providers from this waiver. Such a carve-out will not preclude Los Angeles County from contracting with our program and offering opioid treatment services to its residents.

A recent example of how the proposed Waiver can negatively affect our services can be demonstrated by Proposition 36, the Substance Abuse and Crime Prevention Act of 2000. This

Angela Garner January 21, 2015 Page 2

program offered individuals with minor drug charges an option to enter substance use disorder treatment as opposed to jail time. The program was managed and directed by the county; the processes and outcomes were evaluated by State-contracted UCLA Integrated Substance Abuse Program (ISAP). Despite repeated recommendations by UCLA for the counties to increase the utilization of opioid treatment programs, only 1% percent of those identified with opiate dependence were appropriately referred to methadone maintenance. This lack of methadone utilization despite its science and evidence-supported effectiveness resulted in poor treatment outcomes. A county-wide delivery system, much like the one being proposed in this waiver, significantly failed these patients and our community. Our concern for patient access to opioid treatment, should our programs not be "carved-out" of the waiver, is real; we have experienced it.

Matrix Institute requests that opioid treatment programs be exempted from the Organized Delivery System waiver for the reasons stated above.

If you would like more information, please do not hesitate to contact me at (310) 478-6006. Thank you for your consideration.

Sincerely,

Dan George, MPH, MBA Director of Operations

Matrix Institute on Addictions